

SECTION X - EVEN START FAMILY LITERACY PROGRAM**X - A. PROJECT INFORMATION**

PROJECT TITLE		CHECK PROJECT YEAR	
PARTNER NAME AND CONTACT PERSON		<input type="checkbox"/> YEAR 1 90% FED. SHARE	
ADDRESS		<input type="checkbox"/> YEAR 5 50% FED. SHARE	
TELEPHONE NUMBER		<input type="checkbox"/> YEAR 9 35% FED. SHARE	
E-MAIL ADDRESS		<input type="checkbox"/> YEAR 10 30% FED. SHARE	
FAX NUMBER		<input type="checkbox"/> YEAR 11 & FUTURE YEARS 27% FEDERAL SHARE	
ADULT EDUCATION AND LITERACY PROGRAM (AEL) NAME & CONTACT PERSON		AEL TELEPHONE NUMBER	AEL FAX NUMBER

INDICATE THE APPROXIMATE NUMBER TO BE SERVED BY YOUR PROJECT

_____ ADULTS (AGES 20 AND ABOVE)	_____ CHILDREN BIRTH TO AGE 2
_____ TEEN PARENTS (UNDER THE AGE OF 20)	_____ CHILDREN AGE 3 TO AGE 5
	_____ CHILDREN AGE 6 TO AGE 8
	_____ CHILDREN OVER AGE 8
_____ NUMBER OF NON-PUBLIC SCHOOLS CONSULTED (SEE PAGE 31 FOR REQUIRED FORM)	

X - B. NEEDS ASSESSMENT

Check all that are represented on the family literacy committee that implemented the needs assessment and planning process.

- | | | | |
|---|---|---|--------------------------------------|
| <input type="checkbox"/> PK-8 Teachers | <input type="checkbox"/> PK-8 Building Administrators | <input type="checkbox"/> PK-8 Parents | <input type="checkbox"/> Shelters |
| <input type="checkbox"/> 9-12 Teachers | <input type="checkbox"/> 9-12 Building Administrators | <input type="checkbox"/> 9-12 Parents | <input type="checkbox"/> Head Start |
| <input type="checkbox"/> Students | <input type="checkbox"/> District-Level School Administrators | <input type="checkbox"/> Advocacy Groups | <input type="checkbox"/> AEL |
| <input type="checkbox"/> Business Representatives | <input type="checkbox"/> School Board Members | <input type="checkbox"/> District Federal Programs Coordinator(s) | |
| <input type="checkbox"/> Teen Parents | <input type="checkbox"/> Parents As Teachers | <input type="checkbox"/> DFS | <input type="checkbox"/> Other _____ |

Local input as to the need of a family literacy program was gathered by the following methods. *(Check all that apply)*

- | | | |
|---|---|---|
| <input type="checkbox"/> Interviews | <input type="checkbox"/> Surveys/Questionnaires | <input type="checkbox"/> Focus Groups/Discussions |
| <input type="checkbox"/> District Data Analysis | <input type="checkbox"/> District Data Reports | <input type="checkbox"/> Other _____ |

The family literacy committee met _____ times over _____ months.

- | | |
|---|---|
| <input type="checkbox"/> Identified local expectations/desired outcomes | <input type="checkbox"/> Identified criteria to determine families most in need of services |
| <input type="checkbox"/> Model developer/technical assistance presented on site | <input type="checkbox"/> Technical assistance provided by LIFT |
| <input type="checkbox"/> Visited _____ site(s) with a family literacy models | <input type="checkbox"/> Other _____ |

Read relevant research covering such topics as:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Reading Instruction | <input type="checkbox"/> Student Achievement | <input type="checkbox"/> Professional Development | <input type="checkbox"/> At Risk Students |
| <input type="checkbox"/> Intervention Strategies | <input type="checkbox"/> Parent Involvement | <input type="checkbox"/> Teacher Training | <input type="checkbox"/> Dropout Prevention |
| <input type="checkbox"/> AEL | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Other: _____ |

Trend Census Data from OSEDA report

_____ % Adults with less than twelfth grade education _____ # Adults with less than twelfth-grade education

Kids Count in Missouri reports data for _____ (county name) County Rank _____ /115

_____ % School-age children in poverty	_____ % Children receiving subsidized child care
_____ % Working women with youngest child under six	_____ % Births to mothers with less than 12 years education
_____ % Births to teenagers age 15-19	

X - B. EVEN START FAMILY LITERACY PROGRAM NEEDS ASSESSMENT *continued***County Waiting Lists**

_____ % of eligible children on waiting list for Head Start

_____ # of children on waiting list for Head Start

_____ % of children on waiting list for other EC programs

_____ # of children on waiting list for EC programs

School District Information

_____ % of third-grade children scoring in the bottom two levels of the Missouri Assessment Program

_____ % of families served by Parents As Teachers identified as meeting the High Needs Characteristics

_____ % of children eligible for Title I preschool services (if applicable) _____ # of children in Title I preschool_____ % of children eligible for Title I reading services (if applicable)

_____ # of children in Title I reading programs

_____ % of High School Students Identified as Teen Parents

_____ # of teen parents

_____ Other _____

_____ Other _____

_____ Other _____

_____ Other _____

_____ Other _____

_____ Other _____

X - C. RECRUITMENT AND RETENTION

Describe the methods your project will use to ensure that it will serve families most in need of Even Start Services (including those with special needs such as limited English proficient and individuals with disabilities) and how your program will encourage participants to remain in the program for a time sufficient to meet the program's purpose.